

"Doing Nothing is Not an Option"

WASHINGTON - U.S. Rep. Harry Mitchell today released the following statement ahead of the scheduled House vote on H.R. 3962, The Affordable Health Care for America Act:

"After months of debate, I heard from health care professionals, insurers, patients, and tens of thousands of concerned Arizonans, both for and against reform. Today, I will be presented with the choice to move a bill forward for further improvement in the Senate or to kill the prospect of advancing reform. Despite several concerns I still have with the bill, I believe that doing nothing is not an option. The bill before us is not perfect. No bill ever is. But I believe it contains significant improvements from the bill that was circulated over the summer, in no small part due to feedback from constituents across the country."

"While concerns over some issues remain, it contains no death panels or government takeovers of health care and it will not dismantle the private insurance industry. If I believed it did, I wouldn't vote to move it forward. Most folks in Washington seem to be more concerned with scoring political points for next year's election than delivering reforms we need. The political way out would be a vote to do nothing. But playing it safe, which I could do, is why big problems - like healthcare and immigration reform - have yet to be tackled. I didn't come to Congress to do nothing.

"I believe further improvements need to be made and the House needs to work with the Senate to get it done. I believe this bill can be better in order to improve our health insurance system. I also agree with the recent remarks of Republican Senator Olympia Snowe when she said that when history calls, history calls and that there should be no mistake about it: my vote today, is my vote today. And it in no way forecasts my vote for a final bill in the future. But we can only make those improvements if we move the ball forward. American lives are depending on it."

H.R. 3962 addresses many issues Mitchell had previously laid out such as stopping insurance companies from denying coverage based on pre-existing conditions, strengthening Medicare by closing the "donut hole" and providing individuals more choice, not less. It also prohibits illegal immigrants from receiving any subsidies, and maintains prohibition on federal funding of abortions.

It contains significant improvements from H.R. 3200, the bill that was circulated over the summer. Mitchell had opposed a previous version of the public option alternative that was included in H.R. 3200 which was based on below market Medicare reimbursement rates and would undercut competition and negatively impact doctors and community hospitals. H.R. 3962's version of the public alternative, as drafted, would be based on negotiated rates, the same method private insurers use. While that is an improvement, Mitchell believes in continuing to consider such concepts such as allowing states to opt out, co-ops, or a trigger, which would go into effect if private insurance plans fail to expand affordable coverage sufficiently. This approach has worked successfully in the Medicare Prescription Drug Benefit plan.

Additionally, The non-partisan Congressional Budget Office also projects that H.R. 3962 would reduce federal budget deficits by \$109 billion from 2010 - 2019, with further reductions in the national debt over the next decade. [Source: [Congressional Budget Office](#), November 5, 2009]

Among others, H.R. 3962 has been endorsed by the American Medical Association (AMA), the American Association of Retired Persons (AARP), and the American Cancer Society.